



In re Application of:

JOSE MERINO-LOPEZ et al.

Application No.: 10/071,135

Filed: February 6, 2002

For: MEASUREMENT OF ADHERENCE BETWEEN
A VEHICLE WHEEL AND THE ROADWAY

Docket No. 03161.001145.1

Examiner: Steven D. Maki

Group Art Unit: 1733

Date: October 19, 2004

Express Mail No. EV264377563

MAIL STOP: AMENDMENT
THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

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Date of Deposit October 19, 2004
I hereby certify that this paper or fee is being deposited with the United
States Postal Service "Express Mail Post Office to Addresses" service under
37 CFR 1.10 on the date indicated above and is addressed to:
Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450
Alicia A. Russo, Reg. 46,192
(Typed or printed name of person mailing paper or fee)

Alicia A. Russo

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☐ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	*	MINUS	**	=	x \$9 \$18	
INDEP. CLAIMS	*	MINUS	***	=	x \$44 \$88	
Fee for Multiple Dependent claims \$150°/\$300						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ Verified Statement claiming small entity status is enclosed, if not filed previously.

☐ A check in the amount of \$ _____ is enclosed.

☐ Charge \$ _____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

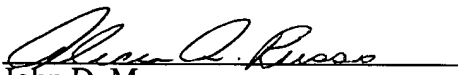
☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

☒ A check in the amount of \$ 430.00 to cover the fee for a 2 month extension is enclosed.

☐ A check in the amount of \$ _____ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,


John D. Murnane
Registration No. 29,836

Alicia A. Russo
Registration No. 46,192
Attorney for Applicants

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3800
Facsimile: (212) 218-2200

Form #120

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